

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on July 21, 2003.

I. DISPUTE

Whether there should be reimbursement for CPT codes 70551 and 72141 for date of service 12/18/02.

II. FINDINGS

The Respondent denied the disputed date of service as "R – Extent of Injury" on January 10, 2003. No TWCC-21's were filed prior to the date of service 12/18/02; the TWCC-21, denying relatedness was filed by the respondent on August 4, 2003, eight months after the disputed date of service and fifteen days after the requestor filed for medical dispute resolution; therefore, this dispute will be reviewed according to the 1996 Medical Fee Guideline.

III. RATIONALE

- CPT Code 70551 for date of service 12/18/02 – Denied as "R". The requestor billed the disputed CPT code with modifiers 27 and 22, per the 1996 Medical Fee Guideline, Radiology/Nuclear Medicine Ground Rules (I)(A)(4) and (II)(C)(3) submitted MRI report supports delivery of service. Reimbursement in the amount of \$756.00 is recommended.
- CPT Code 72141 for date of service 12/18/02 – Denied as "R". The requestor billed the disputed CPT code with modifiers 27 and 22, per the 1996 Medical Fee Guideline, Radiology/Nuclear Medicine Ground Rules (I)(A)(4) and (II)(C)(3) submitted MRI report supports delivery of service. Reimbursement in the amount of \$756.00 is recommended.

IV. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is entitled to reimbursement for CPT codes 70551 and 72141 in the amount of \$1,512.00. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$1,512.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 03rd day of February 2004.

Marguerite Foster
Medical Dispute Resolution Officer
Medical Review Division

Roy Lewis, Supervisor,
Medical Dispute Resolution
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RL/mf